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	Effec	ctive Octo	ber 1, 20	<i>1</i> 03			191.	10	10	
	CLAIMS A		S FILED - PART I (Column 1) (Column 2)				ENTITY	OR	OTHER	THAN
FOTAL CLAIM	OTAL CLAIMS		7			RATE	FEE	1	RATE	FEE
FOR	OR		R FILED	NUM	BER EXTRA	BASIC F		OR	BASIC FEE	770.00
TOTAL CHARGE	OTAL CHARGEABLE CLAIMS		7 minus 20=		\	X\$ 9=		OR		
NDEPENDENT	DEPENDENT CLAIMS		7 minus 3 =		,	X43=			You	
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Total	REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL FEE
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